


# RCRA OUTREACH & DATA VERIFICATION SITE VISIT CHECKLIST

Site visited by Jim Lynch, NOWCC/SEE on: ----->		1-25-99	(date of visit <-----
EPA RCRA ID#::-->	IAR000005918	SIC	3089
Facility Name:	CENTRO INC	City,	NORTH LIBERTY
Facility Address	950 NORTH BEND DR	St, Zip	IA 52317
Phone No.	319-626-5517	----->	
Letters, RCRIS Report and Brochures given to: (name and Title/job description)		Mr. Gary Rozek, president.	
1. Facility Description:		This facility is a non pressure plastic manufacturing firm working with 3 shifts of 350 employees.	
2. What Chemical and/or Industrial Waste (CIW) streams are generated? (List name/type, approx amount generated/mo, final disposition/how disposed)		The general industrial waste is sent to the local landfill. Used oil & spent oil filters are generated at app. 2 gal & 2 spent filter per month that are taken annually by R.M. Boggs of Iowa City, IA. Spent parts washer/degreaser solvent is generated at app. 12 gal per month & is taken by Safety Kleen of Davenport, IA.	
3. Does the facility classify any of their CIW's as hazardous waste (HW) (Specify which)		Yes <u>X</u> No <u>   </u> This facility classifies the spent petroleum naphtha in the parts washer/degreaser as HW.	
4. Does the facility conduct any of the following on-site activities: Treatment/Recycling/Burning/Open Dumping/Landfills/Surface Impoundments? Describe:		No  R00118497 RCRA RECORDS CENTER	
5. Are CIW/HW stored on-site? Describe (material, approx quantity, storage method):		Yes <u>X</u> No <u>   </u> In the parts washer/degreaser unit contained app. 17 gal of solvent.	
6. Describe condition of storage containers/tanks (open, damaged, unlabeled, leaking, etc.):		The storage container was closed with no damage or leakage & labeled.	
7. Are incompatibles stored together (acids, bases, solvents, cyanides)? Describe:		Yes <u>   </u> No <u>X</u>	
8. Are there any signs of past spills/releases (dead or stressed vegetation, ground discoloration, stains)? Describe:		Yes <u>   </u> No <u>X</u>	
9. Do any of the on-site chemical and/or CIW/HW management practices concern you? Describe:		Yes <u>   </u> No <u>X</u> RCRIS data entered by <u>HO</u> <u>HO</u> <u>HO</u> on <u>2/2/99</u> <u>2/18/99</u> <u>2/22/99</u> LIST SIC Edate	

10. Recommendations and/or  
Additional Observations:

None

**GPS FIELD SHEET for Magellan Pro Mark X**

Facility Name: CENTRO INC.

EPA ID No: IAR000005918

Address: 950 NORTH BEND DR County: JOHNSON

City: NORTH LIBERTY State: IOWA Zip: 52317

Collecting Program (Division /Branch): ARTD/RESP Collector JIM LYNCH

Project (EJ, Neosho,...): IOWA RCRA

Date Collected: 1/25/99 Time observation began: 170658 UT Ended: 171158 UT

PDOP: 3.2

GPS Receiver No. (EPA Tag No.): 972109

Filename stored in GPS unit: IAR10251.CAR

Detailed description of point (plant entrance, parking lot, land parcel, well...): GPS TAKEN IN  
THE PARKING LOT OF SITE.

Verbal description of weather: PARTLY CLOUDY WITH A NORTH WIND OF 5 - 10 MPH  
AND TEMP. IN THE LOW 20'S.

Obstructions (buildings, electric lines,...): NO OBSTRUCTIONS

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
CONFIDENTIALITY NOTICE

Facility Name <i>Center Inc.</i>	
Facility Address <i>950 North Bend Dr. North Ridge, IA 52317</i>	
Inspector (print) <i>James L. Lynch</i> <i>Secretal/Kry Trust</i>	
U.S.EPA, Region VII, ENSV Division, 25 Funston Road, Kansas City, KS 66115	Date <i>1/25/99</i>

The United States Environmental Protection Agency (EPA) is obligated, under the Freedom of Information Act, to release information collected during inspections to persons who submit requests for that information. The Freedom of Information Act does, however, have provisions that allow EPA to withhold certain confidential business information from public disclosure. To claim protection for information gathered during this inspection you must request that the information be held CONFIDENTIAL and substantiate your claim in writing by demonstrating that the information meets the requirements in 40 CFR 2, Subpart B. The following criteria in Subpart B must be met:

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. No statute specifically requires disclosure of the information.
3. Disclosure of the information would cause substantial harm to your company's competitive position.

Information that you claim confidential will be held as such pending a determination of applicability by EPA.

I have received this Notice and <u>DO NOT</u> want to make a claim of confidentiality at this time.	
Facility Representative Provided Notice (print)	Signature/Date
<i>GARY R. ROZEK</i>	<i>Gary R. Rozek</i> <i>1/25/99</i>

I have received this Notice and <u>DO</u> want to make a claim of confidentiality.	
Facility Representative Provided Notice (print)	Signature/Date

Information for which confidential treatment is requested:

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UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
RECEIPT FOR DOCUMENTS AND SAMPLES

Facility Name	<i>Center Inc.</i>
Facility Address	<i>950 North Bond St. North Liberty, IA 52317</i>

Documents Collected? YES ☒ (list below) NO ☐

Samples Collected? YES ☐ (list below) NO ☒ Split Samples: YES ☐ NO ☐

Documents/Samples were: 1) Received no charge ☒ 2) Borrowed ☐ 3) Purchased ☐

Amount Paid: \$  Method: Cash ☐ Voucher ☐ To Be Billed ☐

The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.

Receipt for the document(s) and/or sample(s) described below is hereby acknowledged:

*Safety Hleen manifest - 2 pages*

*Service Data Report. 1 page from R.M. Boyce, C.*

Facility Representative (print)	Signature/Date
<i>GARY R. ROZEK</i>	<i>Gary R Rozek 1/25/99</i>
Inspector (print)	Signature/Date
<i>James L. Lynch</i>	<i>James L Lynch 1/25/99</i>
U.S.EPA, Region VII, RCRA/IOWA, 726 Minnesota, Kansas City, KS 66101	



One Brinckman Way  
Elgin, Illinois 60123-7857  
CUSTOMER NO.

WE CARE

DUNS NO. 05106-0408 FED. ID NO. 39-6090019

CUSTOMER

FOR SERVICE CALL	BRANCH MANAGER	DOC. EXP.	SCHEDULED SERVICE WEEK	SCHEDULED TERRITORY	REFERENCE NUMBER
117-384-3024	STEVE PANAEKERS	12/27/99	98-52	95	530245
			CREDIT CODE	PREVIOUS BALANCE	BAL. OVER 60 DAYS
			C	673.88	
BUSINESS TYPE		CHAIN	OUTER COUNTY	SVC. P/C	PROD. P/C
09		N9	YES	492	001
LOCATION			TAX EXEMPTION NO.		
504701					

CENTRO INC  
750 NORTH BEND DRIVE  
FORM DIV  
NORTH LIBERTY IA 52317

BILL TO

SERVICE DATE	SALES REP NO.	CUSTOMER P.O. NUMBER	CUSTOMER PHONE #	TAX CODE	HANDLING CODE	ASSOC. CODE	SERVICE TAX	C.O.M.S. TAX	PRODUCT TAX
12/30/98	7882		319-626-5576	16-260-6180			.05	.05	.05

DEPT	SERVICE/PRODUCT	SERIAL NUMBER	REMARKS/INIT PRICE	QUAN.	CHARGE	SALES TAX	TOTAL CHARGE	WASTE MIN.	SOLVENT/DRUMS			CC	SERVICE TERM	CHANGE SERVICE TERM (WEEKS)(INITIAL)	CHANGE SCH. DATE (Y/M/W)	INV. CODE	PROMO NO.	RELEASE	MSL
									CLEAN	SPENT	# OF CONT.	SK DOT							
1	30300	10399515		1	127.50	6.33	133.83	0.00	17	16	1	60083		4					
2																			
3																			
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			

TOTAL-SERVICE/PRODUCTS

127.50 6.33 133.83 0.00

CHECK APPROPRIATE BOXES

MACHINE CONDITION & CLEANLINESS  
LAMP ASSEMBLY CONDITION

GOOD POOR

DECALS IN PLACE AND LEGIBLE  
FUSIBLE LINK INSTALLED  
EMERGENCY CLOSING OF LID UNOBSTRUCTED

YES NO

MACHINE PROPERLY GROUNDED  
LOCAL PHONE NO. STICKER AFFIXED TO MACHINE  
SPENT SOLVENT MEETS ACCEPTANCE CRITERIA

YES NO

MANIFEST NO.	USEPA TRANSPORTER ID NO.	GENERATOR USEPA ID NO.	GENERATOR STATE ID NO.
XXXXX	1094410A202	1AR00000591A	16100649192

11. US DOT DESCRIPTION (INCLUDING PROPER SHIPPING NAME, HAZARD CLASS, AND ID.)  
10 WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA)  
NA1993 PG111(0001) (0006, 0008, 0013, 0027, 0039, 0040) (ERG#124)

12. CONTAINERS NO.	13. TOTAL QUANTITY	14. UNIT WT/VOL	SK DOT NUMBER	55.105	1 CERTIFY THAT MY TOTAL WASTE STREAMS ARE WITHIN ONE OF THE FOLLOWING CATEGORIES: 0 TO 220 LBS./MONTH 220 LBS. TO 2,200 LBS./MONTH GREATER THAN 2,200 LBS./MONTH
1	16	6	60083		INITIALS 220 LBS. TO 2,200 LBS./MONTH INITIALS GREATER THAN 2,200 LBS./MONTH INITIALS

DESIGNATED FACILITY NAME AND ADDRESS  
SAFETY-KLEEN SYSTEMS, INC.  
1035 WEST 7TH STREET  
DAVENPORT, IA 52806

USA EPA ID NO. 1AR00000591A  
STATE ID NO.

PAYMENT RECEIVED SECTION	CASH <input type="checkbox"/>	TOTAL RECEIVED	APPLY PAYMENT TO:	
	CHECK NUMBER		<input type="checkbox"/> TODAY'S SERVICE/SALE <input type="checkbox"/> PREVIOUS BALANCE AS FOLLOWS	
	INVOICE #	AMOUNT \$	INVOICE #	AMOUNT \$

LDR MESSAGE	
LDR NOT RECD	
MANIFEST CODE	SEQ #
117	224

I AGREE TO PAY THE ABOVE CHARGES AND TO BE BOUND BY THE TERMS AND CONDITIONS SET FORTH ABOVE AND ON THE REVERSE SIDE OF THIS DOCUMENT. PLEASE CHARGE MY ACCOUNT FOR THIS TRANSACTION UNLESS OTHERWISE INDICATED IN THE PAYMENT RECEIVED SECTION. THE INDIVIDUAL SIGNING THIS DOCUMENT IS DULY AUTHORIZED TO SIGN AND BIND CUSTOMER TO ITS TERMS.  
\*This is to certify that the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.\*  
Print Customer Name  
By: *Steve Panakers*  
Customer's Authorized Representative

TOTAL CHARGE (FROM ABOVE)	
WASTE MIN. (FROM ABOVE)	
TOTAL DUE	133.86
DO NOT WRITE IN THE AREA BELOW	

IN THE EVENT OF AN  
EMERGENCY CALL  
1-800-468-1760 (24 hours)

SERVICE AND SALES ACKNOWLEDGMENT

ACCOUNT NUMBER <b>5-047-01-2205</b>	LOCATION NUMBER 000504701	TAX STATUS / NUMBER	MANIFEST NUMBER	INVOICE NUMBER <b>530245</b>
BILL TO NUMBER		SERVICE DATE 12-30-1998	INVOICE DATE 01-01-1999	PLEASE PAY INVOICE BY: <b>01-16-1999</b>

**SERVICE ADDRESS**

CENTRO INC  
950 N BEND DR  
NORTH LIBERTY IA 52317-9300

DPT	DESCRIPTION / PRODUCT OR SERVICE #	QUANTITY	UOM	UNIT COST	TAX	ITEM TOTAL
00	CIRCULATING CLEANER W/105 RECY					
	000030300-030390515	1.0000		127.5000	6.38	133.88
	INVOICE TOTAL				\$6.38	\$133.88

FOR INFORMATION PLEASE CALL SK SERVICING LOCATION: 319-386-3024 DAVENPORT, IA

Safety-Kleen and Laidlaw Environmental Services have formed a new organization with a goal of continuing to provide value added solutions to your business and environmental needs. Any changes occurring will be thoroughly evaluated to ensure they have only a positive impact on our customers. Payments should continue to be made to Safety-Kleen, and our remittance address remains the same.

PLEASE DO NOT USE ANY STAPLES WITH REMITTANCE

RETURN THIS PORTION WITH PAYMENT TO: P.O. BOX 1800 ELGIN IL 60121-7857



ACCOUNT NUMBER	INVOICE NUMBER	SERVICE DATE	INVOICE DATE	BILL TO NUMBER
5-047-01-2205-5	530245	12-30-1998	01-01-1999	

530245 5047012205500133880000638

CENTRO INC  
950 N BEND DR  
NORTH LIBERTY IA 52317-9300

AMOUNT DUE  
\$133.88





2804 INDUSTRIAL PARK ROAD - P.O. BOX 1130

IOWA CITY IOWA 52244  
(319) 338-9741SERVICE DATA  
REPORT

Atlas Copco

ST 7:30

STP 11:30

(one man)

CUSTOMER: CentroADDRESS: N. LibertyDATE: 12-21-98DATE OF LAST SERVICE: Oct.CONTACT: John T.

## TYPE OF SERVICE:

MAKE: Atlas CopcoHOURS: 21285/Ld 17780☒ PLANNEDMODEL: GA-75OP. TEMP: 175°F☐ EMERGENCYSERIAL: H01030194OP. PRESS: 115-125

SYSTEM COMPONENTS	CHECKED	CHANGED	CLEANED	REPAIRED
AIR FILTER	✓	(new filter element on order)		
OIL FILTER		✓	changed oil ALSO HD Roto fluid	
SEPARATOR		✓	SEP. FROM CUST. STOCK	
SCAVENGER LINE	✓		✓	
CONTROL COMPONENTS	Removed & Replaced Safety Relief Valve			
HEAT EXCHANGERS	✓			
CONDENSATE DRAINS	Found broken Part in condensate drain			
PREFILTERS	N/C			
AIR DRYERS	✓	sec. Temp 38°F Evap. Temp 35°F	Amb. 71°F disg. Temp 96°F	
AFTER FILTERS	N/C			
CONTROL FILTERS	N/A			
DRIVE MOTOR & COUPLING	✓	still needs to be replaced - A shaft seal which is on order.		

MOTOR MFR. \_\_\_\_\_ H.P. \_\_\_\_\_ RPM \_\_\_\_\_ VOLTS \_\_\_\_\_

AMPS: \_\_\_\_\_ S.F. \_\_\_\_\_ MOTOR SERIAL NO. \_\_\_\_\_

PACKAGE VOLTAGE READINGS: L1 L2 \_\_\_\_\_ L1 L3 \_\_\_\_\_ L2 L3 \_\_\_\_\_

COMPRESSOR AMP READING: L1 \_\_\_\_\_ L2 \_\_\_\_\_ L3 \_\_\_\_\_ PSIG \_\_\_\_\_

COOLING MOTOR READING: L1 \_\_\_\_\_ L2 \_\_\_\_\_ L3 \_\_\_\_\_

## WATER COOLED COMPRESSORS:

WATER TEMP IN: N/A WATER TEMP OUT: Clarum Volesky

WATER PRESSURE IN: \_\_\_\_\_

SYSTEM TYPE: ☐ CITY ☒ WELL ☐ CHILLED ☐ GLYCOL ☐ TOWERCOMMENTS: Service of Compressor for overpressurizationProblem. Compressor CKS ok at this time2- oil filters / 15 gal bucket oil / Impv Kit / 1 Relief ValveSec 1 Rings for Condensate Tr. P



## PROCEDURES for Inspectors/Investigators/etc. performing Site Visits

Present the Facility representative with a copy of their:

- RCRIS Handler Information Report (attached)
- Copy of the current Notification Form (attached)
- Copy of the current Notification Booklet (attached)

Our instructions to them are printed on their RCRIS Handler Information Report - and should be self explanatory. If the facility wants to revise their RCRIS Handler Information Report, they can do so and mail it back to EPA - or have the inspector deliver it.

If during the course of the site visit, the inspector/investigator becomes aware of any changes which should be made to the information printed on this form, please make the corrections and return the form to: Harriett Jones, ARTD/RESP.

EPA RCRA ID Number: IAR000005918

Name of Company/Installation: CENTRO INC  
Location of Installation: 950 NORTH BEND DR  
City/State/Zip: NORTH LIBERTY, IA 52317  
County: JOHNSON

Mailing Address: 950 NORTH BEND DR  
City/State/Zip: NORTH LIBERTY, IA 52317

Installation Contact: GARY ROZEK  
Job Title: PRESIDENT  
Phone Number: (319) 626-5517  
Contact's Address: 950 NORTH BEND DR  
City/State/Zip: NORTH LIBERTY, IA 52317

Current Owner of Installation: GARY ROZEK / RICHARD L ROZEK  
Owner's Address: 3460 COTTAGE GROVE AVE SE  
City/State/Zip: CEDAR RAPIDS, IA 52403  
Phone Number: (319) 365-8834

Land Type: Private  
Owner Type: Private

TYPE(S) OF REGULATED ACTIVITY: CONDITIONALLY EXEMPT SQG

Hazardous Wastes Handled: D001, F002

E 02/24/98 N N 04/10/98 3

Date of Site Visit or Inspection: 1/25/99

Signed: *[Signature]*

Site Investigator/Inspector



IAR000005918 Centro Inc North Liberty, IA Photos taken: 1/25/99  
Photo #1 Parts washer/degreaser unit containing approx. 17 gallons of solvent



IAR000005918 Centro Inc North Liberty, IA Photos taken: 1/25/99  
Photo #2 GPS Reading taken at the main entrance to the parking lot of the site.

